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PTO/SB/01 (10-05)

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DECLARATION — Utility or Design Patent Application

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NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Matthew Graeme		Family Name or Surname Dunlop		
Inventor's Signature 		Date 18 th August 2006		
Residence: City London	State Lysia	Country GB	Citizenship British	
Mailing Address 31, Leake Street Fulham, London SW6 6NF Imperial College London, Hammersmith Hospital, Du Cane Road				
City London	State	ZIP SW6 6NF W12 8NN	Country GB	
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on <u>1</u> supplemental sheet(s) PTO/SB/02A or 02LR are attached				

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PTO/SB/02A (08-04)

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DECLARATION**ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Family Name or Surname		
Ian Charles		Eperon		
Inventor's Signature				Date
Residence: City	Leicester	State	Country GB	Citizenship
Mailing Address: Department of Biochemistry, University of Leicester, University Road				
City	Leicester	State	ZIP LE1 7RH	Country GB
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Family Name or Surname		
Francesco		Muntoni		
Inventor's Signature	<i>Francesco Muntoni</i>			Date: 11/09/06
Residence: City	London	State	Country GB	Citizenship ITALIAN
Mailing Address: Department of Paediatrics, Imperial College London, Hammersmith Hospital, Du Cane Road				
City	London	State	ZIP W12 0NN	Country GB
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Family Name or Surname		
Inventor's Signature				Date
Residence: City		State	Country	Citizenship
Mailing Address:				
City		State	ZIP	Country

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
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Inventor's Signature	I. C. Eperon		Date: 17 th August 2006
Residence: City	Leicester	State	Country GB
Citizenship: UK			
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City	Leicester	State	ZIP LB1 7RH
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Francesco		Muntoni	
Inventor's Signature			Date
Residence: City	London	State	Country GB
Citizenship			
Mailing Address: Department of Paediatrics, Imperial College London, Hammersmith Hospital, Du Cane Road			
City	London	State	ZIP W12 0NN
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			Date
Residence: City		State	Country
Citizenship			
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